



SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT
BY A CANDIDATE'S COMMITTEE
(\$1,000 CONTRIBUTIONS OR MORE)

State Form 48492 (R3/11-05)
Indiana Election Commission (IC 3-9-5-20.1; 3-9-5-22)

(CFA-11)

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11
REPORT

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

COMMITTEE INFORMATION

1. Full Name of Candidate (include any nickname) <input type="checkbox"/> Check if this is a new name SCOTT A. BALDWIN		2. Committee Telephone Number (317) 590-7546	
3. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address 16095 PROSPERITY DR. - SUITE 600			
4. City NOBLESVILLE	State IN	ZIP Code 46060	5. Party Affiliation or If Independent Candidate REPUBLICAN
6. Office Sought (include district number, if any. Not required for exploratory committee.) HAMILTON COUNTY SHERIFF			7. County of Residence HAMILTON
8. Reporting Period: From: 4/10/10 Through: 5/4/10			
For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; NONE for all entries which are not one of the above categories.			

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY
Classification CORP	1. SLUSSER FAMILY PARTNERSHIP, LLC 10804 BROOKS SCHOOL RD. FISHERS, IN 46037 Contributor's Occupation (if applicable) _____	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) _____	\$2000.00	4/15/10 TREASURER
Classification INDV	2. EP JOLIFFE 10854 NATURE TRAIL DRIVE APT. 112 FISHERS, IN 46038 Contributor's Occupation (if applicable) PROFESSIONAL ENGINEER	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) _____	\$1000.00	4/15/10 TREASURER
Classification INDV	3. KEITH C. MATHEWS 8766 SOUTH ST. SUITE 210 FISHERS, IN 46038 Contributor's Occupation (if applicable) INSURANCE AGENT	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____ Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) _____	\$1000.00	4/15/10 TREASURER

CERTIFICATION STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS	
Title TREASURER	Date (MM-DD-YY) 04/16/10
	Date (MM-DD-YY) 04/16/10
This report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who fails to file a complete or accurate report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18)	

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APR 16 2010
4:44 AM
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